Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

		CLAIMS AS	S FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			65				F	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS	65 minus 20=		. 45		,	(\$ 9=		OR	X\$18=	810	
IND	EPENDENT CL	AIMS	C/ mir	nus 3 =	· 6			X40=		OR	X80=	4.80	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT								070		
* If the difference in column 1 is less than zero, enter "0" in column 2								135=	ACOMO DE LO SERVICIO	OR	+270=	o managament or according	
								OTAL	A SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE P	OR	TOTAL	2000	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							9	OTHER THAN SMALL ENTITY OR SMALL ENTITY					
-		(Column 1)			(Column 3)	Ě				Oliver			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT	0.	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	: (\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		= .	>	(40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		+	135=	.	OR	+270=		
										• • • • • • • • • • • • • • • • • • •	TOTAL		
								TOTAL IT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	0	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
NOW	Total	*	Minus	**		=	×	(\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	\ \ \ \ \ \	(40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							135=		OR	+270=		
								TOTAL			TOTAL		
								OIT. FEE		OR	ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)		• •					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	0	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	>	(\$ 9=		OR	X\$18=	,	
AME	Independent	*	Minus	***	T 01 111	<u> -</u>		< 40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												